



FUSION 111

Grades 6th, 7th, & 8th
Drop-in Monday-Thursdays 3-5:30 pm
No Fee for members; \$60 for General Public

PARTICIPANT FIRST NAME: _____ LAST NAME: _____

MALE FEMALE DATE OF BIRTH: ___/___/___ School of Enrollment _____ Grade _____

DROP IN DAYS MONDAY TUESDAY WEDNESDAY THURSDAY

TRANSPORTATION NEEDED from school indicated above*: _____ Yes _____ No

*Registration form required

PRIMARY GUARDIAN INFORMATION

LAST NAME: _____ FIRST NAME: _____

E-MAIL: _____ PHONE: _____
(Required)

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

EMERGENCY CONTACT(S) (Please list parent/guardian names and other contacts):

NAME: _____ PHONE: _____ RELATION: _____

NAME: _____ PHONE: _____ RELATION: _____

SPECIAL LIMITATIONS OR CONCERNS? _____

FUSION participants are expected to stay signed into the program for a minimum of 1 hour unless otherwise participating in another Y program. By signing below parent understands that child has the privilege to sign in and out of FUSION program. The Y is only responsible for child when signed into the program. Separate registration form required for transportation to be provided from school.

SIGNATURE OF PARENT/GUARDIAN

DATE

SIGNATURE OF CHILD

DATE